

PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/763,387	RECEIVED
Filing Date	01/23/2004	RECEIVED CENTRAL FAX CENTER
First Named Inventor	C. Frank Bennett	SEP 14 2006
Art Unit	1636	
Examiner Name	Guy L. Guldry	
Total Number of Pages in This Submission	3	Attorney Docket Number
		CORE0028US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Stmt. Under 37 CFR 3.73(b)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Isis Pharmaceuticals, Inc.		
Signature			
Printed name	Frances R. Putkey, Ph.D.		
Date	September 14 2006	Reg. No.	57,257

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name

Jamie Toupa

Date

9/14/06

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PTO/SB/62 (04-05)

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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10763,367
Filing Date	01-23-2004
First Named Inventor	C. Frank Bennett
Art Unit	1835
Examiner Name	Guy L. Gedry
Attorney Docket Number	CORE0028US

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I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number:

32,650

 Please change the correspondence address for the above-identified application to: The address associated with
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OR

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Individual Name

Address

City

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**Signature 

Name Grandand E. Bryce

Date 7/12/2006

Telephone 760-931-9200

NOTE: Signatures of all the inventors or assignees of record of the entity (firm or other representative(s)) are required. Submit multiple forms if more than one signature is required, use below.

 Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PAGE 23 * RCVD AT 7/12/2006 2:48:37 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-15 * DNIS:2738300 * CSID:7606033820 * DURATION (mm:ss):01:30

PAGE 23 * RCVD AT 9/14/2006 1:48:08 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-642 * DNIS:2738300 * CSID:7606033820 * DURATION (mm:ss):01:12

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PTO/SB/08 (08-04)
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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Isis Pharmaceuticals, Inc.

Application No./Patent No.: 10/763,387 Filed/Issue Date: 7/23/2004

Entitled: HEPATOCYTE FREE UPTAKE ASSAYS

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SEP 14 2006

Isis Pharmaceuticals, Inc. a Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

In the patent application/patent identified above by virtue of either:

A An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 14553, Frame 0494, or for which a copy thereof is attached.

OR

B A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
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The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3. If the assignment is to be recorded in the records of the USPTO, See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Grantland E. Bryce

7/16/2006

Signature

Date

Grantland E. Bryce

760-931-200

Printed or Typed Name

Telephone Number

Vice President, General and Legal Counsel

Title

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PAGE 3/3 *RCVD AT 9/14/2006 1:48:08 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/42 * DNIS:2738300 * CSID:7606033820 * DURATION (mm:ss):01:12